

FOR POST OFFICE USE ONLY	POSTMASTER	DATE BOX OPENED 6-3-63	DATE BOX CLOSED 9-26-63	BOX NO. 30061
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APPLICANT PLEASE NOTE: Completion of this application signifies your willingness to comply with all postal rules relative to the renting and use of Post Office boxes.

NAME OF APPLICANT (Print or type)
L. H. OSWALD

NAME OF FIRM OR CORPORATION (If box is rented for use of other)
None

KIND OF BUSINESS
None

BUSINESS ADDRESS (No., street, and zone)
None

HOME ADDRESS (No., street, and zone)
657 French St. New Orleans

SIGNATURE OF APPLICANT
X L. H. Oswald

DATE OF APPLICATION
June 3 1963

OFFICIAL
D-12

CE 318

NAME	PRINT OR TYPE L. H. OSWALD	DATE OF APPLICATION NOV. 15 63
OLD ADDRESS	HOUSE NO. AND STREET, APT. NO., OR BOX OR R. D. NO. (In care of) 496 7th Avenue St. And R. D. 261 CITY, ZONE, AND STATE New Orleans, LA.	
NEW ADDRESS	HOUSE NO. AND STREET, APT. NO., OR BOX OR R. D. NO. (In care of) P.O. Box 6225 CITY, ZONE, AND STATE New Orleans, LA.	
SIGNATURE	L. H. Oswald	

CE 986